

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

DAVID EARL WILLIAMS III FOR CONGRESS

ADDRESS (number and street)

1055 W GRANVILLE APT 703

Check if different
than previously
reported. (ACC)

CHICAGO

IL

60660

2. FEC IDENTIFICATION NUMBER ▼

C

C00545533

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

IL

09

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

10

D D /

01

Y Y Y Y /

2013

through

M M /

12

D D /

31

Y Y Y Y /

2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Shari Martin

Signature of Treasurer Shari Martin

[Electronically Filed]

Date

M M /

01

D D /

23

Y Y Y Y /

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 13

Write or Type Committee Name

DAVID EARL WILLIAMS III FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	3

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	675.00	2454.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	675.00	2454.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1465.30	3863.81
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	1465.30	3863.81
8. Cash on Hand at Close of Reporting Period (from Line 27)	0.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	1489.81	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 13

Write or Type Committee Name

DAVID EARL WILLIAMS III FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y
10 / 01 / 2013

To:

M M / D D / Y Y Y Y
12 / 31 / 2013

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

500.00

1000.00

(ii) Unitemized.....

175.00

1454.00

(iii) TOTAL of contributions from individuals ▶

675.00

2454.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

675.00

2454.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

790.30

1489.81

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

790.30

1489.81

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

1465.30

3943.81

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 13

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1465.30	3863.81
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	80.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	1465.30	3943.81

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1465.30
25. SUBTOTAL (add Line 23 and Line 24).....	1465.30
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1465.30
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 13

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DAVID EARL WILLIAMS III FOR CONGRESS

Full Name (Last, First, Middle Initial)

John Michael

Mailing Address 1016 Seneca Rd

City

Wilmette

State

IL

Zip Code

60091

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Doctor

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2013

Transaction ID : SA11Al.4190

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 13

<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	--	-------------------------------------	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

DAVID EARL WILLIAMS III FOR CONGRESS

Full Name (Last, First, Middle Initial)

David Earl Williams III

Mailing Address 1055 W Granville Apt 703

City

Chicago

State

IL

Zip Code

60660

FEC ID number of contributing
federal political committee.

C H4IL09074

Name of Employer

Self-employed

Occupation

Model

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

790.30

Date of Receipt

12 / **31** / **2013**

Transaction ID : SA13A.4217

Amount of Each Receipt this Period

790.30

loan

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

/ /

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

/ /

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

790.30

790.30

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 13

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

DAVID EARL WILLIAMS III FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Amtrak

Mailing Address 225 South Canal Street

City	State	Zip Code
Chicago	IL	60661

Purpose of Disbursement
travel

Candidate Name

David Earl Williams III

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2013

Amount of Each Disbursement this Period

212.00

Transaction ID : SB17.4202

B. Chicago Transit Authority

Mailing Address 567 West Lake St

City	State	Zip Code
Chicago	IL	60661

Purpose of Disbursement
travel

Candidate Name

David Earl Williams III

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2013

Amount of Each Disbursement this Period

28.00

Transaction ID : SB17.4191

c. Chicago Transit Authority

Mailing Address 567 West Lake St

City	State	Zip Code
Chicago	IL	60661

Purpose of Disbursement
travel

Candidate Name

David Earl Williams III

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		12		2013

Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.4194

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

260.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 13

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

DAVID EARL WILLIAMS III FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Chicago Transit Authority

Mailing Address 567 West Lake St

City	State	Zip Code
Chicago	IL	60661

Purpose of Disbursement
travel

Candidate Name

David Earl Williams III

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		13		2013

Amount of Each Disbursement this Period

9.50

Transaction ID : SB17.4192

B. Chicago Transit Authority

Mailing Address 567 West Lake St

City	State	Zip Code
Chicago	IL	60661

Purpose of Disbursement
travel

Candidate Name

David Earl Williams III

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		13		2013

Amount of Each Disbursement this Period

28.00

Transaction ID : SB17.4193

c. Chicago Transit Authority

Mailing Address 567 West Lake St

City	State	Zip Code
Chicago	IL	60661

Purpose of Disbursement
travel

Candidate Name

David Earl Williams III

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		21		2013

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4201

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

137.50

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 13

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

DAVID EARL WILLIAMS III FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Chicago Transit Authority

Mailing Address 567 West Lake St

City	State	Zip Code
Chicago	IL	60661

Purpose of Disbursement
travel

Candidate Name

David Earl Williams III

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: IL District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		30		2013

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4204

B. Chicago Transit Authority

Mailing Address 567 West Lake St

City	State	Zip Code
Chicago	IL	60661

Purpose of Disbursement
travel

Candidate Name

David Earl Williams III

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: IL District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2013

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.4215

C. Delta Air Lines Inc

Mailing Address 1030 Delta Blvd

City	State	Zip Code
Atlanta	GA	30320-6001

Purpose of Disbursement
travel

Candidate Name

David Earl Williams III

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: IL District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		13		2013

Amount of Each Disbursement this Period

389.80

Transaction ID : SB17.4211

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

589.80

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 13

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

DAVID EARL WILLIAMS III FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address 233 S Wacker Dr

City	State	Zip Code
Chicago	IL	60606

Purpose of Disbursement
travel

Candidate Name

David Earl Williams III

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: IL District: 09

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2013

Amount of Each Disbursement this Period

381.90

Transaction ID : SB17.4210

B.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

--

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

381.90

1369.20

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 11 OF 13

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4155

DAVID EARL WILLIAMS III FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

DAVID EARL WILLIAMS III FOR CONGRESS

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1055 W GRANVILLE APT 703

City

State

ZIP Code

CHICAGO

IL

60660

Original Amount of Loan

221.89

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

221.89

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 30 / 2013

Date Due

M M / D D / Y Y Y Y
11/30/2014

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

221.89

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 12 OF 13

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4184

DAVID EARL WILLIAMS III FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

DAVID EARL WILLIAMS III FOR CONGRESS

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1055 W GRANVILLE APT 703

City

State

ZIP Code

CHICAGO

IL

60660

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

477.62

0.00

477.62

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y
09 30 / 2013M M / D D / Y Y Y Y
11/30/2014

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

477.62

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 13 OF 13

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4217

DAVID EARL WILLIAMS III FOR CONGRESS**LOAN SOURCE** Full Name (Last, First, Middle Initial)**[PERSONAL FUNDS]**

Election: 2014

David Earl Williams III

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1055 W Granville Apt 703

City

State

ZIP Code

Chicago

IL

60660

Original Amount of Loan

790.30

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

790.30

TERMS

Date Incurred

M M / D D / Y Y Y Y
12 / 31 / 2013

Date Due

M M / D D / Y Y Y Y
12/31/14

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

790.30

TOTALS This Period (last page in this line only)..... ►

1489.81

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.